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JOANN KUCZYNSKI (Depositor's name)
 JoAnn Kuczyński (Signature)
 10-27-06 (Date)

APPLICATION NO.	FILING DATE	FIRST NAMED INVENTOR	ATTORNEY DOCKET NO.	CONFIRMATION NO.
10/809,041	03/25/2004	Mika Anttila	3003-00044	5800

TITLE OF INVENTION: ARRANGEMENT IN CONNECTION WITH A PATIENT CIRCUIT AND AN ABSORBER MEANS

APPLN. TYPE	SMALL ENTITY	ISSUE FEE DUE	PUBLICATION FEE DUE	PREV. PAID ISSUE FEE	TOTAL FEE(S) DUE	DATE DUE
nonprovisional	NO	\$1400	\$300	\$0	\$1700	10/31/2006

EXAMINER	ART UNIT	CLASS-SUBCLASS
BLOUNT, ERIC	2612	340-573100

1. Change of correspondence address or indication of "Fee Address" (37 CFR 1.363).
☐ Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached.
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(1) the names of up to 3 registered patent attorneys or agents OR, alternatively,
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3. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type)

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(A) NAME OF ASSIGNEE

(B) RESIDENCE: (CITY and STATE OR COUNTRY)

GE HEALTHCARE FINLAND Oy

HELSINKI, FINLAND

Please check the appropriate assignee category or categories (will not be printed on the patent): ☐ Individual ☒ Corporation or other private group entity ☐ Government

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☒ Issue Fee
☒ Publication Fee (No small entity discount permitted)
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5. Change in Entity Status (from status indicated above)

☐ a. Applicant claims SMALL ENTITY status. See 37 CFR 1.27. ☐ b. Applicant is no longer claiming SMALL ENTITY status. See 37 CFR 1.27(g)(2).

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Authorized Signature Daniel D. Fetterley

Date 10/27/06

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